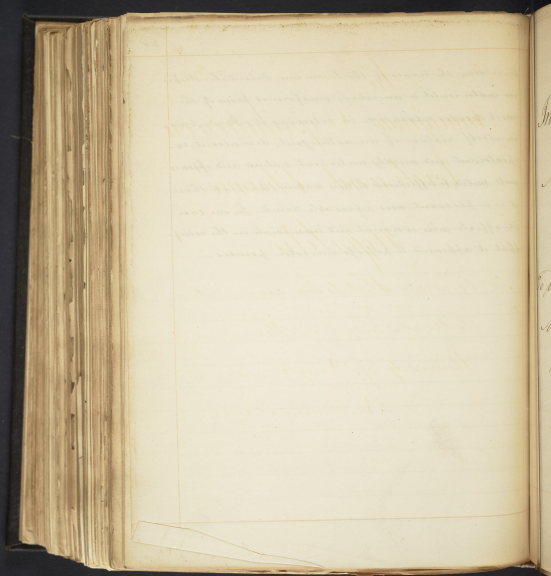


W. S. H. No 21
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An
Inaugural Dissertation on
Acute and Chronic
Hepatitis

To be submitted to the examination
of the
Medical Faculty of the
University of Pennsylvania
By Furman S. Cook.
of N. Jersey



Gentlemen

In compliance with the wise regulations of this institution which render it necessary for each candidate to write a dissertation on some medical or scientific subject; I have selected Hepatitis in its two distinct forms viz acute and chronic. Before entering into a detail of these diseases, and in order to explain their nature more fully, I will premise a short anatomical description of the organ which is the seat of them, together with its particular functions and appropriate secretions.

The liver is evidently the largest gland in the body, and when in a healthy condition is of a reddish brown colour, it is composed of tolerable fine substances consisting of closely united corpora of different vessels, whose office is the secretion of bile, which is carried on by a vein instead of an artery.

In a healthy adult its ordinary weight is

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about three pounds, but is subject to great variation in this respect, sometimes increased to a very great extent by the accumulation of disease, and sometimes diminished by the same causes, and manifestly indurated.

It is situated in the right hypochondriac region which it entirely occupies, and extend through the upper portion of the epigastrium into the left.

Its figure is irregular, concave inferiorly; it is very thick towards the upper and right side, and gradually grows thinner as it extends into the left.

It consists of three lobes. And is retained in its position by five ligaments.

It consists of several kinds of vessels, viz the hepatic Artery, the vena portae, and the hepatic veins; likewise the excretory duct and absorbents.

The vena porta fulfils both the office of an artery and vein.

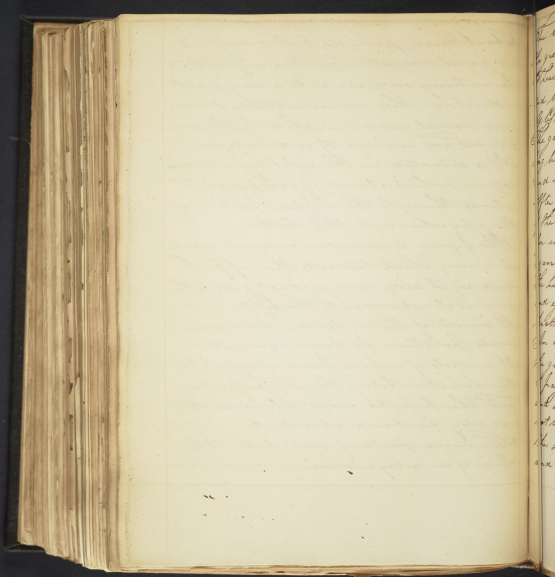
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The liver is supplied with nerves from
the great sympathetic and Eighth Pair.
These are collected together and surroun-
ded by a histoneal coat called
Glyssons Capsule.

The gall bladder is a small sac or
bag bearing the resemblance to a pear;
and is composed of four coats.

After this general view of the structure
of the liver we come better prepared
for entering upon the diseases of that
organ. There is perhaps no part of
the human body that is more important
and essentially connected with life and
health than the liver.

In consequence of its large bulk and
the great quantity of blood destined
to pass through it, and of its minute
and oblique circulation, we should
not be surprised that it so often becomes
the seat of severe and dangerous diseases;
and more especially those under consid-



eration of the acute and chronic inflammation of that organ. We shall now proceed to speak of the acute form. The following is Cullen's definition.

A febrile disease attended with pungent pain; frequent strong and hard pulse and high coloured urine. This disease may almost always be known by the following symptoms; tension and pain in the right hypochondriac region, which is for the most part increased by pressure; the pain is sometimes acute as in pleurisy, but more generally dull and obtuse; difficult in lying on the left side, dyspnoea, though sometimes humed vomiting of bilious matter and dyspnoea, particularly it is supposed if the ~~inner~~ convex surface is affected. It frequently happens that the pain occupies a position in the right side which renders it difficult to determine whether the lungs or the liver is the seat

of the affection. The pain extends to the clavicle
or top of the shoulder, burning sensation
in the side. Doct. Rush was of opinion
that the pain was more frequent in the
left shoulder of women, and in the right
of men. The pain is not altogether con-
fined to the right Hypochondriac region,
but is sometimes found in the left.

The cough is supposed not to be
so troublesome when the concave
surface is affected. Many complain
of heartburn. The intestines are
generally constipated, and the stools
denote a deficiency of biliary secretion,
urine small in quantity, and of a
saffron colour.

There is a loss of appetite, intense thirst,
the skin hot and dry at the same time,
and the tongue covered with a thick
white fur, sometimes of a yellowish
tinge, accompanied with strong hard
and frequent pulse amounting generally

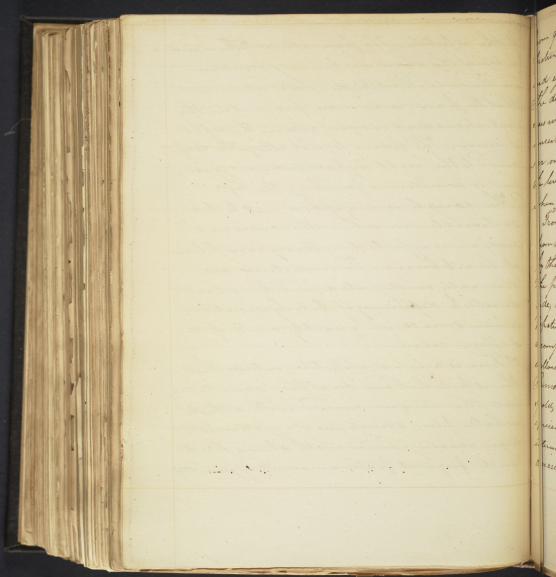
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from 98 to 100° in a minute. After the patient is sick a few days the skin and eyes partake of a yellowish tinge. The diagnosis of this disease in some cases will be found very difficult and uncertain, and the most accurate observer may be mistaken and imagine the liver to be the seat of the disease when it is in a perfectly natural condition.

From Pneumonia, it may be distinguished from the pain being increased by pressure; by the difficulty in Pneumonia which the patients feel in laying on the affected side, the contrary of which happens in Hepatitis; by cough not in general being accompanied by expectoration, and also by pallor of the countenance.

Remote Causes, such as the application of cold, external injuries from blows, violent exercise, intense heat, Gluttony, long continued intermittent and remittent fevers; these diseases produce it by causing obstruction



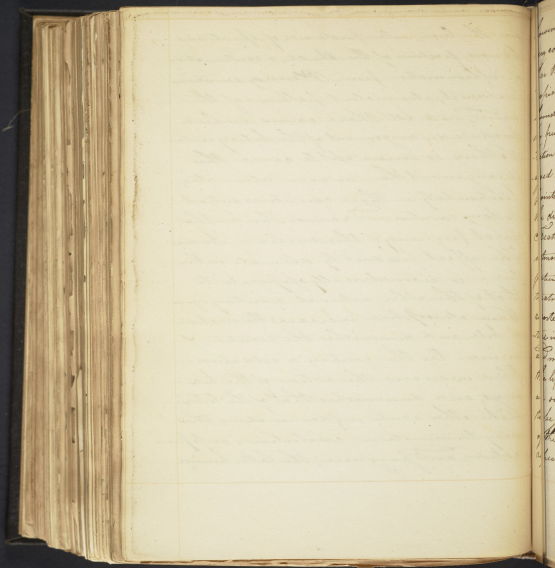
in the liver, intemperate use of spirituous
liquors, fracturing of the skull, & continuation
of inflammation from Pleurisy sometimes
produces it, also violent passions of the
mind, and all those causes which
produce derangement of the biliary secretion.
Nothing is more apt to cause this
derangement than warm climates,
particularly in those countries subject
to long continued rains. Hence the
great frequency of this disease in India.
The effect produced by climate on the
liver is diametrically opposite to
that of the other internal secretory organs.
Warm atmosphere increases the secretion
of bile, and diminishes the secretion of
urine. On the contrary a cold atmos-
phere increases the action of the kid-
neys, and diminishes that of the liver.
Like other acute inflammations, this
may terminate in resolution, suppu-
ration, and gangrene; the latter however

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however is extremely rare. The two former are very common, but of the two the first is by far the most frequent, and is effected by copious evacuation from the system by hemorrhages by bilious diarrhoea accompanied by febrile discharges. When it ends in suppuration the contents of the abscess may be discharged in several ways, externally when it points that way, in the rectum and through the diaphragm into the substance of the lungs.

Treatment. In this disease it is of the utmost importance to the welfare of our patient, that the most prompt and rapid treatment should be immediately resorted to. Timid feeble and dilatory practice in all acute diseases are reprehensible and more especially in the present, were the life and future health of our patient are so eminently concerned, and the object to be gained so desirable. 1st Termination of the disease by resolution. With this view repeated and in general very copious 2^d



must be prevented. However the state of the constitution must be attended to, when it is strong and the habits plethoric. Large and repeated bleedings are urgently demanded and must not be delayed, particularly if the disease is attended with much congestion.

On the number of bleedings we must be governed by the violence of the symptoms and the habit of living.

When the constitution is naturally weak or debilitated by disease general bleeding must be more sparingly administered.

Beside general bleeding topical bleeding by means of cups, or leeches will be found serviceable. We may adopt this mode when it is not safe to open a vein in the arm. If the pain in the side is not relieved by venesection, we must have recourse to blisters, and these large enough to cover the affected part. Their utility does not depend altogether upon their

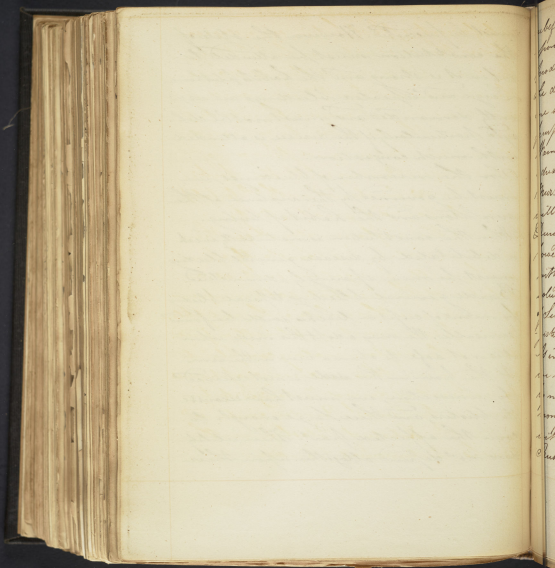
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rebeneficent effect, but in some degree
upon the evacuation which they
produce. It is very difficult to cure
the disease without them, and if
one should not answer the intended
purpose they should be repeated.

Warm fomentations and issues are of
a disadvantage. Purgings with the Sub:
Mer: Hydr^g combined with Pulsatilla
will be found of great utility.

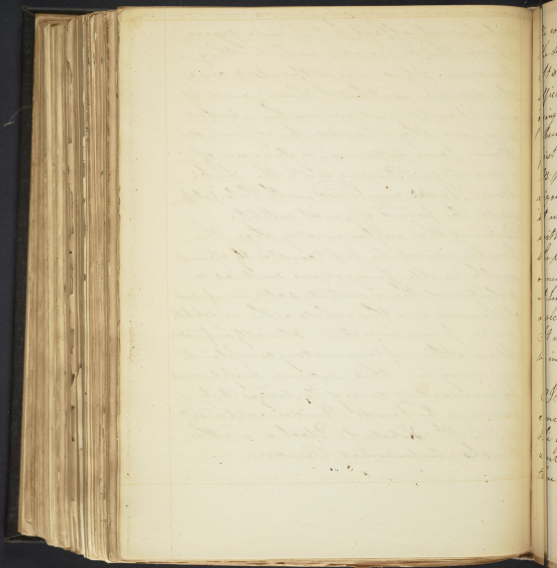
During the inflammatory stage, the
bowels must be kept constantly open
with gentle purgatives, such as a
solution of the neutral salts, in infusion
of Senna and the whole of the antiphlo-
gistic plan must be strictly enforced.
As in other inflammatory complaints
we may in this, induce disphoreses
by nauseating doses of Tartarized Anti-
mony, or by James's Powder combined
with the Nitrate of Potash or with
Rush's Antimonial Powder.



We come now to speak of the last remedy in
the disease *Hyd. mercur.*

It is a remedy of very great importance and
efficacy is fully established. But in empl-
ying it some caution is necessary to be
observed. 1st It must not be given at the
first invasion of the disease, and not before
Purgings and diaphoretics &c. have been
vigorously administered. In some instances
it will be necessary to combine opium
with it, to keep it from running off by
the bowels. Mercurial frictions to the part
or neighbouring parts must be resorted to.
A single Salivation sometimes fails; but
a second generally will cure.
It will do good when Ptyalism cannot
be induced.

It will be unnecessary to say much
concerning the chronic species of *Hepatitis*.
The symptoms are nearly similar to the
acute species; but in addition to them
there is a morbid complexion, wasting of flesh,



lowness of spirits, and despondency of
mind, often pain in the side extend-
ing to the shoulder, general debility, indig-
estion, flatulency, acidity, pain in the
stomach, clay coloured stools, yellow
tinge of the skin and eyes, renal fulness
and sense of weight in the region
of the liver.

The cure of this ~~is~~ ^{is} to be effected by topical
bleeding, purging, blisters repeatedly applied
over the region of the liver; Nitric acids; and
the Nitro Muria-tic acids bath; this has a
great influence in promoting the secretion
of bile, and excite the extreme vessels on the
surface; And lastly by mercury which is
beyond doubt the most efficacious medicine,
and it should be given in small doses
and gently introduced so as to effect the
system gradually.

I have now closed my remarks with the confi-
dent hope that the professors of this university will
generously excuse every imperfection of this

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of this composition for the sake of the good
intentions of the writer who thus offers his
feeble mile towards the advancement
of medical science

